

07/09/01



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BOX PATENT APPLICATION

67-1701

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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.: 000161
Date: July 9, 2001
Express Mail Label No.: EL:802448014US

Customer No.: 023696 Bar Code
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23696

PATENT TRADEMARK OFFICE

Dear Sir:

Transmitted herewith for filing is the patent application of:

Inventor(s): Liat Ben-Zur, Curtis D. Musfeldt, Christopher Wingert, Paul Pommes, Jesse Hose, Ann C. Irvine,
and Senthil Govindaswamy

For: APPARATUS AND METHOD FOR INSTALLING A DECRYPTION KEY.

Enclosed are:

1. Patent application (33) total pages.
2. Drawings: Formal (5) sheet(s) or Informal () sheet(s).
3. Declaration/Power of Attorney: Signed Unsigned
4. An Assignment () pages and Recordation Form Cover Sheet.
5. A Preliminary Amendment () pages.
6. Information Disclosure Statement (IDS):
 - a. PTO-1449
 - b. Copies of IDS Citations (number of citations:)
7. Other:

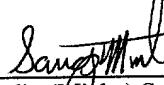
CLAIMS:	(a) Filed	(b) Extra Claims	Large Entity Fee	Fee Paid
Total*	41 - 20	21	x \$18 =	\$378
Independent**	6 - 3	3	x \$80 =	\$240
Multiple Dependent Claim(s):	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		\$270	\$
APPLICATION FILING FEE			\$710	\$710
		TOTAL FEE		\$1328

*If the number in column a is less than 20, enter 0 in column b.

**If the number in column b is less than 3, enter 0 in column b.

8. A check in the amount of \$_____ is enclosed to pay the filing fee.
9. Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$1328.00. The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment, to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
10. The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: July 9, 2001

Signature: 
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